BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE **FOLLOWING**

SHAFT, BEARING AND MOTOR

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	SHAFT, BEARING	AND MOTOR	· . · · · · · · · · · · · · · · · · · ·		 		<u> </u>		
Fill in Appropriate			eto. If not attached here						
Information -									
For Use Without	the specification was filed on United States Application Number and amended on								
Specification Attached:	the specification was filed on						as PCT		
· · · · · · · · · · · · · · · · · · ·	International A	pplication Number_	· · · · · · · · · · · · · · · · · · ·	-	; and was				
	International Application Numberamended on						plicable)		
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the								
	representative or as patent or inventor's application by me of I hereby claim or inventor's certific	ation in any countr signs more than the certificate on this in r my legal representa foreign priority bene ate listed below and	y foreign to the United by foreign to the United leve months (six month vention has been filed in the sassigns, except of the under Title 35, United have also identified below on which priority is classified.	of States of America is for designs) prior (in any country foreign as follows. and States Code, §119 ow any foreign applic	on an application to this application, a not the United State	filed by me nd that no a es of America	or my legal pplication for a prior to this		
	Prior Foreign App	lication(s)				Priority C	Claimed		
Insert Priority Information:	2002-190640	Japan		June/28/2002					
(if appropriate)	(Number)	(Country)		(Month/Day/Yea	nr Filed)	Yes	No		
(, , ,	. ,				
	(Number)	(Country)	<u>' </u>	(Month/Day/Yea	ar Filed)	Yes	□ No		
	(Number)	(Country)		(Month/Day/Yea	ır Filed)	Yes	No		
	(Number)	(Country)		(Month/Day/Yea	r Filed)	□ Yes	□ No		
	I hereby claim the benefit under Title 35, United States Code, §11								
	i nereby claim the bo	enent under 11tie 35,	United States Code, \$11	a(e) or any United St	ates provisional app	ucanons(s) u	sted below.		
Insert Provisional					 				
Application(s): (if any)	(Application Numb	e ŗ)		(Filing Date)					
	(Application Number) (Fi				ng Date)				
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
	Country		Application Number	Date	e of Filing (Month/D	ay/Year)			
Insert Requested Information: (if appropriate)			· · · · · · · · · · · · · · · · · · ·				<u>.</u>		
•	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Insert Prior U.S.		·				·			
Application(s): (if any)	(Application Numb	er)	(Filing Date)	(Sta	tus - patented, pendi	ing, abandon	ed)		
•	(Application Numb	er)	(Filing Date)	(Sta	tus - patented, pendi	ing, abandon	ed)		

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statement and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ll Name of First or Sole Inventor; ort Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
nventor → ert Date This Document is Signed	Kazuhiko KAKEGAWA	Konzwhiko Kakegawa		June 23, 2003					
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ll Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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	MAILING ADDRESS (Complete Street Address	including City, State & Country)		en e					
dl Name of Fourth Inventor, if any: see ahove	GIVEN NAME/FAMÎLY NAME	INVENTOR'S SIGNATURE		DATE*					
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oll Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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